



Alcimedès

A welcome review in the *BMJ* (2009;339:37–42) on managing hepatitis C infection reminds clinicians that if individuals with chronic infection are identified and treated – estimates in the UK suggest that 50% of those infected are unaware that they carry the virus – the virus can be eradicated in more than half of them. Forensic physicians assess intravenous drug users on a daily basis and should encourage them to access services as up to 50% may have the disease. It is important that those with chronic infection are referred to secondary care to stage liver disease and consider the need for antiviral therapy.

Alcimedès struggles to understand the forces that might drive a mother to deliberately harm her child, yet the extensive literature on Munchausen syndrome by proxy attests to the wide variety of symptoms that have been induced, alleged or simulated by mothers. One such example is provided by the case history of a 9-month old child who developed severe caustic oesophagitis following the administration by the mother of an anti-limescale agent in her food (*Child Abuse & Neglect* 2009;33:293–5). The psychiatric assessment of the child's mother, who had a few years' experience as a nurse, revealed a history of self-mutilation from the age of 17. She had no symptoms of psychosis or depression. The psychiatric expert retrospectively concluded that she had presented with Munchausen syndrome during her youth. She had transposed her self-aggressiveness onto her child, hence inflicting abuse.

Druglink (2009;24:4:13) has recently highlighted the problem of severe physical addiction to the Class C liquid solvent GHB and its legal precursor GBL. Withdrawal may occur similar to that seen in acute alcohol withdrawal with anxiety, sweating, tremors and even psychosis, requiring treatment with benzodiazepines. There have been calls in the UK to control GBL, which is currently legal, and which converts to GHB in the human gut. GHB was brought under the Misuse of Drugs Act in 2003.

Both CS (chlorobenzylidene-malononitrile) and PAVA (pelargonic acid vanillylamide) are used by police in the UK. A clinical review in the *BMJ* (2009;338:1554–1558) suggests that when used for crowd control these substances are not without risk, especially for people with pre-existing respiratory conditions. Clinicians must protect themselves to prevent secondary exposure and ensure that individuals who are contaminated have their clothes removed as an immediate first aid measure. The treatment remains controversial as CS dissolved in water may intensify skin irritation. There is

no doubt that, for severe pulmonary symptoms, oxygen and hospitalisation may be required and persisting ocular symptoms require ophthalmological assessment.

In the past, research into the impact of drugs and alcohol on fatal road traffic incidents has concentrated on the possible impairment of the driver. Therefore, a comparative study of drug and alcohol findings in 1047 different victim groups (drivers of cars, vans or lorries, car passengers, motorcyclists, motorcycle passengers, cyclists and pedestrians) makes interesting reading (*Science & Justice* 2009;49:19–23). Of all the victims, 54% tested positive for drugs and/or alcohol. Although a wide range of drugs were detected (including drugs of abuse, prescribed medications and over-the-counter products), alcohol and cannabinoids were the most frequent substances across the victim groups. Overall, the presence of drugs and/or alcohol was of similar frequency in those victims in control (55% of driver, 48% of motorcyclists, 33% of cyclists) and not in control of a vehicle (52% of car passengers, 63% of pedestrians). This degree of frequency strongly implicates the involvement of drugs and alcohol in road traffic incidents through impairment not only of those directly involved in an incident (driver/riders) but also indirect victims (pedestrians).

The detection of condom lubricants in forensic casework samples relies on the identification of 'slippery agents' (such as Polydimethylsiloxane (PDMS) and Polyethylene glycol (PEG)) by methods that typically involve extracting half the material of interest in forensic casework (usually a swab) for condom lubricant analysis. In spite of there being some excellent published research concerning these techniques, the analysis of swabs in sexual assault cases for condom lubricants is rarely undertaken in the UK. It seems that there are two reasons for this. Firstly, there is a reluctance to allow half a swab to be consumed that could contain the biological material sufficient to generate a DNA profile. Secondly, a perception that there is a high risk of false positives causes caseworkers to be nervous about reporting the presence of condom lubricants confidently. A study reported in *Science & Justice* (2009; 49: 32–40) describes a new technique that facilitates analysis of swabs for condom lubricants without the need for extraction. The results suggest that the technique is equivalent to the traditional methods in terms of sensitivity and discriminating power whilst having no detrimental effect on subsequent DNA extraction of swabs. This new technique may increase the uptake of condom lubricant analysis in sexual assault cases.